

MAY 09 2005

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PTO/SB/21 (6-99)

Approved for use through 09/30/2000. OMB 0651-0031

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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**TRANSMITTAL  
FORM**

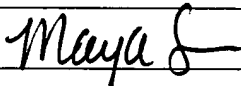
(to be used for all correspondence after initial filing)

<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	<b>Application Number</b>	10/718,499	
	<b>Filing Date</b>	November 19, 2003	
	<b>First Named Inventor</b>	Nathaniel E. David	
	<b>Group/Art Unit</b>	3622	
	<b>Examiner Name</b>	Unassigned	
<b>Total Number of Pages in This Submission</b>	2	<b>Attorney Docket Number</b>	29117-702.201


**ENCLOSURES (check all that apply)**

<input type="checkbox"/> Fee Transmittal <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Small Entity Statement <input type="checkbox"/> Request for Refund	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Additional Enclosure(s) (please identify below): Request for Withdrawal as Attorney or Agent and Change of Address Correspondence.
<b>Remarks</b> The Commissioner is hereby authorized to charge and credit deposit account 23-1415 (Attorney Docket No. 29117-702.201) for any charge of credit, overpayment, or any additional fees required.		

**SIGNATURE OF APPLICANT, ATTORNEY OR AGENT**

<b>Firm or Individual name</b>	Maya Skubatch, Reg. No. 52,505, WILSON SONSINI GOODRICH & ROSATI		
<b>Signature</b>			
<b>Date</b>	May 5, 2005	<b>Customer Number:</b>	021971

**CERTIFICATE OF FIRST CLASS MAIL**

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<b>Typed or printed name</b>	Queenie B. Ngo		
<b>Signature</b>		<b>Date</b>	May 5, 2005

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MAY 09 2005

PTO/SB/83 (09-03)

Approved for use through 11/30/2005. OMB 0651-0035

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**REQUEST FOR WITHDRAWAL  
AS ATTORNEY OR AGENT  
AND CHANGE OF  
CORRESPONDENCE ADDRESS**

Application Number	10/718,499
Filed	November 19, 2003
First Named Inventor	Nathaniel E. David
Art Unit	3622
Examiner Name	Unassigned
Attorney Docket Number	29117-702.201

**To: Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**

Please withdraw me as attorney or agent for the above identified patent application, and

- ☐ all the attorneys/agents of record.
- ☐ the attorneys/agents (with registration numbers) listed on the attached paper(s), or
- ☒ the attorneys/agents associated with Customer Number 021971

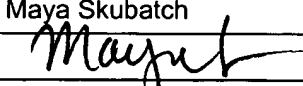
NOTE: This box can only be checked when the power of attorney of record in the application is to all the practitioners associated with a customer number.

The reasons for this request are: Under 37 C.F.R. §10.40, GreenTech, Inc. has failed to pay one or more bills rendered by the practitioner for an unreasonable period of time or has failed to honor an agreement to pay a retainer in advance of the performance of legal services.

**CORRESPONDENCE ADDRESS**

1. ☐ The correspondence address is NOT affected by this withdrawal.
2. ☐ Change the correspondence address and direct all future correspondence to:

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<input checked="" type="checkbox"/> Firm or Individual Name	William T. Christiansen				
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City	Seattle	State	WA	Zip	98104
Country	USA				
Telephone	(206) 622-4900			Fax	(206) 682-6031
Name	Maya Skubatch				
Signature				Registration No.	52,505
Date	May 5, 2005			Telephone No.	(650) 493-9300

NOTE: Withdrawal is effective when approved rather than when received. Unless there are at least 30 days between approval of withdrawal and the expiration date of a time period for response or possible extension period, the request to withdraw is normally disapproved.

This collection of information is required by 37 CFR 1.36. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450

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